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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/520,306	<b>FILING DATE</b> 03/07/2000 <b>RULE</b> -	<b>CLASS</b> 340	<b>GROUP ART UNIT</b> 2735	<b>ATTORNEY DOCKET NO.</b> 1631077-0025
<b>APPLICANTS</b> Michael A. Kepler, Aloha, OR ; Nicholas J. Elsey, West Linn, OR ; Michael Essex, Tigard, OR ; John S. Stafford, Portland, OR ; Timothy A. Timmins, Tigard, OR ;				
<b>** CONTINUING DATA *****</b> <i>none HA</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none HA</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/08/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> OR	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 38
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>HA</i>			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> White & Case LLP Patent Department 1155 Avenue of the Americas New York, NY 10036-2787				
<b>TITLE</b> Directory assistance system capable of providing telephonic concierge services				
<b>FILING FEE RECEIVED</b> 1144	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 9605

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<b>SERIAL NUMBER</b> 09/520,306	<b>FILING DATE</b> 03/07/2000 <b>RULE</b>	<b>CLASS</b> 379	<b>GROUP ART UNIT</b> 2642	<b>ATTORNEY DOCKET NO.</b> 1631077-0025
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## APPLICANTS

Michael A. Kepler, Aloha, OR;  
Nicholas J. Elsey, West Linn, OR;  
Michael Essex, Tigard, OR;  
John S. Stafford, Portland, OR;  
Timothy A. Timmins, Tigard, OR;

\*\* CONTINUING DATA \*\*\*\*\* *none HA*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none HA*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/08/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 11	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> <i>HA</i> Examiner's Signature Initials				

## ADDRESS

Alex L Yip  
Kaye Scholer LLP  
425 Park Avenue  
New York, NY 10022

## TITLE

Directory assistance system capable of providing telephonic concierge services

<b>FILING FEE RECEIVED</b> 1144	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT. No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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